### AGENDA REDEVELOPMENT COMMISSION

### McCloskey Conference Room September 8, 2014 5:00 p.m.

- I. ROLL CALL
- II. READING OF THE MINUTES –August 4, 2014
- **III. EXAMINATION OF CLAIMS** –August 15, 2014 for \$189,151.45 and August 29, 2014 for \$83,294.83
- **IV. EXAMINATION OF PAYROLL REGISTERS-** August 8, 2014 for \$26,576.24 and August 22, 2014 for \$27,345.83
- V. REPORT OF OFFICERS AND COMMITTEES

**A.** Director's Report

VI. UNFINISHED BUSINESS

None.

VII. NEW BUSINESS

**RESOLUTION 14-39:** Approval to amend 2014 CDBG funding agreements.

#### VIII. BUSINESS/GENERAL DISCUSSION

- **A.** HMAL budget increase for 1600 Willis Drive #60
- **B.** CTP update
- X. ADJOURNMENT

#### THE REDEVELOPMENT COMMISSION OF THE CITY OF BLOOMINGTON,

INDIANA, met on Monday, August 4, 2014 at 5:00 p.m. in the Showers City Hall, McCloskey Conference Room, 401 North Morton Street, with David Walter presiding

I. Commissioners Present: Sue Sgambelluri, Kelly Smith, David Walter, and Elizabeth Kehoe

Commissioners Absent: John West and Michael Gentile

Staff Present: Lisa Abbott and Christina Finley

Other (s) Present: Danise Alano-Martin, Greg Small, Roy Aten, Margie Rice and Lindsey

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**II. READING OF THE MINUTES** – Elizabeth Kehoe made a motion to accept the July 7, 2014 minutes. Sue Sgambelluri seconded motion. The board unanimously approved.

- **III. EXAMINATION OF CLAIMS** –Sue Sgambelluri made a motion to approve the claims for July 3, 2014 for \$220,492.69; July 18, 2014 for \$65,902.61; August 1, 2014 for \$420,083.17 Elizabeth Kehoe seconded the motion. The board unanimously approved.
- **IV. EXAMINATION OF PAYROLL REGISTERS-** Sue Sgambelluri made a motion to accept the payrolls for July 11, 2014 for 26,549.14 and July 25, 2014 for \$26,556.26. Elizabeth Kehoe seconded the motion. The board unanimously approved.

#### V. REPORT OF OFFICERS AND COMMITTEES

**A.** Director's Report. Abbott stated we hired a new Neighborhood Compliance Officer. The Comprehensive Annual Performance Evaluation Report (CAPER) has been posted for public comment through August 16, 2014. On August 18<sup>th</sup> we will send it to HUD for their approval. We are continuing to work on the Consolidated Plan. As part of the new State legislation, we needed to provide the Department of Local Government Finance (DLGF) a copy of the plans and any amended plans for each TIF District by August 1<sup>st</sup>, 2014; we did meet our deadline. Our budget will go to Council on August 19, 2014. The monthly TIF report is attached to the director's report with an estimated date of completion for each project. Abbott briefly outlined the TIF report.

#### VI. UNFINISHED BUSINESS

None.

#### VII. NEW BUSINESS

**RESOLUTION 14-35:** Approval of Change Order for Tapp Road. Roy Aten stated in 2011 the Redevelopment Commission passed Resolution 11-34, authorizing up to \$2,750,000 from the Tapp Road TIF to be expended for needed improvements to road, pedestrian network and other right of way improvements. The project was awarded to Crider & Crider, Inc. Throughout the project there was an initial change order for \$45,443.00 as a result of a permit issue that came through the Indiana Department of Environmental Management. They asked for an extra culvert. We placed another culvert as a condition of the permit. Throughout the remainder of the project there was a series of other changes; bridge design and changes with the parking lot. Change order number two (2) is for \$276,285.46. The biggest change is the amount of rock that was excavated during the project which is paid for by cubic yard. Originally there was approximately 300 cubic yards of rock. However, once the excavation was complete there was over 900 cubic yards, which

is \$138,000 of the change order. The project is now complete; we just need to make the final payment. Sue Sgambelluri made a motion to approve Resolution 14-35. Elizabeth Kehoe seconded the motion. The board unanimously approved.

**RESOLUTION 14-36:** Approval of 2<sup>nd</sup> Change Order for Klenck Company for Deconstruction of Warehouse B. Danise Alano-Martin stated there was a previous change-order that included the purchase of a transformer. Klenck expected to recycle and recoup some of that cost. The contaminant levels were found to be higher than indicated by the label affixed to the transformer, resulting in greater than foreseen disposal costs incurred to Klenck. We would like to reimburse Klenck Company for the unforeseen costs of disposal due to contamination. The transportation cost and late fee will be the contractor's responsibility. Once they bill us for these two change orders the project will be finished. The change order amount we are requesting is \$1,003.50. Elizabeth Kehoe made a motion to approve Resolution 14-36. Sue Sgambelluri seconded the motion. The board unanimously approved.

**RESOLUTION 14-37:** Approval to transfer the Dispatch Center to the Redevelopment Commission.

**RESOLUTION 14-38:** Approval to transfer the Dispatch Center from the Redevelopment Commission to the Public Works Department.

Margie Rice stated Resolution 14-37 is the Redevelopment Commission's acceptance of the 2<sup>nd</sup> floor condominium unit of the Transit Dispatch Building. A formal acceptance is required because this building is set-up as a condominium unit. The Federal Transit Authority (FTA) approval was required prior to getting this project built. The condominium is required because the FTA has funding in the first floor. Last week the Council authority conveyed ownership to the Redevelopment Commission. The Redevelopment Commission does not want to incur management costs. Therefore, in Resolution 14-38 we are requesting approval to transfer the Dispatch Center 2<sup>nd</sup> floor condominium unit to the Public Works Department. They will be responsible for all expenses related to the building. These expenses will either be built into the facilities expense budget or a separate dispatch budget. There will be a ribbon cutting and open house on August 20, 2014.

Sue Sgambelluri made a motion to approve Resolution 14-37. Elizabeth Kehoe seconded the motion. The board unanimously approved.

Elizabeth Kehoe made a motion to approve Resolution 14-38. Sue Sgambelluri seconded the motion. The board unanimously approved.

#### VIII. BUSINESS/GENERAL DISCUSSION

CTP update. Danise Alano-Martin stated Warehouse B is almost done. Warehouse A is scheduled to be complete by September 6, 2014. The Brownfield Assessment grant is moving along. We have six public meeting in our work plan through the three-year assessment grant period. The second public meeting will probably be in September or October. Alano-Martin also stated the meeting could be another good opportunity to let people know where we are with the overall Certified Tech Park project, in addition to some of the Brownfield Assessment results we have gotten. Utility and Drainage Master Planning effort is going well. We are trying to schedule a meeting next week with Brock from Eagle Ridge to begin talking about possible energy innovation ideas. We have been working with Duke Energy toward a plan. They have an alternative energy division out of North Carolina and have put together a structure that might help

X. ADJOURNMENT
The meeting adjourned at 5:45 p.m.

David Walter, President

Michael Gentile, Secretary

us evaluate our next steps forward. We are still working through the Showers Administration

sale.

Date



## Board of Redevelopment Claim Register Invoice Date Range 08/05/14 - 08/15/14

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 101 - General Fund	_	100 - 100 -								
Department 15 - HAND										
Program 150500 - Housing										· ·
Account 53960 - Grants	00151111		D 111 FFT #		00/05/20/4	00/05/00/4	00//5/2014			
168 - Harmony School Corporation	081514-rhinos	15-JHSS Funding for Rhinos Youth Center	Paid by EFT # 3987		08/05/2014	08/05/2014	08/15/2014		08/15/2014	25,000.00
3164 - New Hope Family Shelter, INC	081514-new hope	15-JHSS Funding for New Hope Family Shelter	Pald by EFT # 4027		08/05/2014	08/05/2014	08/15/2014		08/15/2014	2,240.78
12129 - Stepping Stones, INC	2014-00000564	15-Encumbered Funds for Stepping Stones -	Paid by EFT # 4058		08/05/2014	08/05/2014	08/15/2014		08/15/2014	643.85
		12 00		Α	ccount 53960 -	<b>Grants</b> Totals	In	voice Transactions	s 3	\$27,884.63
				Progr	am <b>150500 - H</b>	lousing Totals	In	voice Transactions	3	\$27,884.63
Program 151000 - Neighborhood Account 53160 - Instruction										
4677 - International Code Council, INC	081514-ICC	15-Neighborhood Instruction	Paid by Check # 58084		08/05/2014	08/05/2014	08/15/2014		08/15/2014	102.50
		msa debon	# 30001	Accour	nt <b>53160 - Inst</b>	ruction Totals	In	voice Transactions	5 1	\$102.50
Account 53990 - Other Services and Charg 4483 - City Lawn Corporation	es 8209	15-Neighborhood other	Paid by Check		08/05/2014	08/05/2014	08/15/2014		08/15/2014	25.00
4463 - City Lawii Corporadon	0209	services	# 58056		00/03/2014	00/03/2014	00/13/2014		00/13/2014	25.00
		30171003		53990 - Other	Services and C	harges Totals	In	voice Transactions	- 1	\$25.00
				Program 15	1000 - Neighb	orhood Totals	In	voice Transactions	5 2	\$127.50
Program 152000 - Historic Preservation										
Account 53310 - Printing										
2077 - JEM Printing, INC (PIP Printing & Marketing )	60554	15-Historic Funds - printing	Paid by EFT # 4005		08/05/2014	08/05/2014	08/15/2014		08/15/2014	462.50
,				Acc	count <b>53310</b> - F	<b>Printing</b> Totals	In	voice Transactions	5 1	\$462.50
			Pro	gram <b>152000</b> -	Historic Prese	rvation Totals	In	voice Transactions	- 1	\$462.50
					Department 15 -	- HAND Totals	In	voice Transactions	· 6	\$28,474.63
				Fur	nd 101 - Gener	al Fund Totals	In	voice Transactions	· 6	\$28,474.63
Fund 250 - CDBG  Department 15 - HAND  Program 150000 - Main  Account 52110 - Office Supplies										
383 - Maxwell's Office Supply	102245	15-CDBG Office Supplies	Paid by EFT # 30		08/05/2014	08/05/2014	08/15/2014		08/15/2014	29,42
383 - Maxwell's Office Supply	102262	15-CDBG Funds for Office Supplies	Paid by EFT #		08/05/2014	08/05/2014	08/15/2014		08/15/2014	1.74
		Office Supplies	30	Account 52	2110 - Office S	upplies Totals	In	voice Transactions	- 2	\$31.16
Account 53990 - Other Services and Charg	es					- 1 1 month one 1998/9				,
174 - Hoosier Hills Food Bank Inc	081514-HHFB	15-CDBG Funds for HHFB Funding	Paid by Check # 10354		08/05/2014	08/05/2014	08/15/2014		08/15/2014	6,848.10
231 - Indiana University Health Bloomington, INC	081514-hmal	15-CDBG HMAL Partnership - 310 E, 20th	Paid by Check		08/05/2014	08/05/2014	08/15/2014		08/15/2014	300.00

232 - Monroe County United Ministries	081514-MCUM	15-CDBG Funds for	Paid by EFT #	08/05/2014	08/05/2014	08/15/2014	08/15/2014	24,500.00
12129 - Stepping Stones, INC	SS 081514-Stepping	MCUM Social Service 15-CDBG Funds for	Paid by EFT #	08/05/2014	08/05/2014	08/15/2014	08/15/2014	2,597.00
		Stepping Stones Funding		- Other Services and C	harges Totals	Invoice Trans	sactions 4	\$34,245.10
•			newant 33330	Program 150000	_	Invoice Tran		\$34,276.26
				Department 15 -		Invoice Tran		\$34,276.26
				The state of the s	- CDBG Totals	Invoice Tran		\$34,276.26
Fund 254 - HOME				Fullu 230	- CDBG TO(als	THVOICE HAIR	Sacuons 6	\$34,270.20
Department 15 - HAND						4		
Program 150000 - Main			ž					
Account 53990 - Other Services and Charg	ges							
4483 - City Lawn Corporation	8441	15-HOME Misc Admin for	Paid by Check	08/05/2014	08/05/2014	08/15/2014	08/15/2014	60.00
		Evergreen Lot 1	# 5360	8.8.9				
4483 - City Lawn Corporation	8214	15-HOME Funds Misc	Paid by Check	08/05/2014	08/05/2014	08/15/2014	08/15/2014	50.00
4483 - City Lawn Corporation	8208	Admin for Mowing 2105 15-HOME Funds for Misc		08/05/2014	08/05/2014	08/15/2014	00/15/2014	20.00
4465 - City Lawii Corporadori	0200	Admin for mowing at	# 5360	06/03/2014	06/03/2014	00/13/2014	08/15/2014	30.00
4483 - City Lawn Corporation	081514-8210	15-HOME Funds for misc		08/05/2014	08/05/2014	08/04/2014	08/15/2014	90.00
		admin for mowing at	# 5360		,	, and Montage and	,	*****
4483 - City Lawn Corporation	8444	15-HOME Funds for	Paid by Check	08/05/2014	08/05/2014	08/04/2014	08/15/2014	50.00
		2105 Susie Street -	# 5360	011 6 1 10				
			Account 53990	- Other Services and C		Invoice Trans		\$280.00
				Program <b>150000</b>		Invoice Trans		\$280.00
				Department 15 -		Invoice Trans		\$280.00
				Fund <b>254</b> -	HOME Totals	Invoice Trans	sactions 5	\$280.00
Fund 256 - Special Grants								
Department 15 - HAND								
Program 150002 - Housing Counseling Account 53990 - Other Services and Chan	ger.							
4098 - Equifax Information Services, LLC	B26830	15-HOUSING	Paid by EFT #	08/05/2014	08/05/2014	08/15/2014	08/15/2014	28.16
		COUNSELING - STATE	3972	200,000,000				
			Account 53990	<ul> <li>Other Services and C</li> </ul>	harges Totals	Invoice Trans	sactions 1	\$28.16
			Program	150002 - Housing Cou	n <b>seling</b> Totals	Invoice Trans	sactions 1	\$28.16
Program 150009 - 2002 Shelter Plus Care								
Account 53990 - Other Services and Char	-							
421 - Centerstone	081514-Shelter F	15-Shelter Plus Grant	Paid by Check	08/05/2014	08/05/2014	08/15/2014	08/15/2014	3,420.00
		8/15/14	# 58050	- Other Services and C	barges Totals	Invoice Trans	cactions 1	\$3,420.00
				0009 - 2002 Shelter Plu		Invoice Trans		\$3,420.00
			riogiani 130					
				Department 15 -		Invoice Trans		\$3,448.16
				Fund 256 - Special	Grants Totals	Invoice Trans	sactions 2	\$3,448.16
Fund 408 - Unsafe Housing								
Department 15 - HAND Program 150000 - Main								
Account 53990 - Other Services and Char	ges					**		
18036 - 4 U Lawn and Landscape, LLC	1170	15-Unsafe Building Fund	Paid by EFT #	08/05/2014	08/05/2014	08/15/2014	08/15/2014	645,00
		for 3637 E. Morningside	3932			ved 6 arr 1		STATE OF STA
			Account 53990	- Other Services and C	harges Totals	Invoice Trans	sactions 1	\$645.00
				Program <b>150000</b>	- Main Totals	Invoice Trans	sactions 1	\$645.00
				Department 15 -	HAND Totals	Invoice Trans	sactions 1	\$645.00
•				Fund 408 - Unsafe H	ousing Totals	Invoice Trans	sactions 1	\$645.00

Fund 440 - TIF-Downtown Department 15 - HAND Program 150000 - Main Account 53990 - Other Services and Char	nas							
17909 - Boltinghouse Construction, INC	4862	15-Resolution 11-28 M3 (440 DT)	Paid by Check # 58044	08/05/2014	08/05/2014	08/15/2014	08/15/2014	2,700.00
912 - Central Security Systems, INC	345722	15-TIF Claims for Downtown fund 440 BCT	Paid by Check	08/05/2014	08/05/2014	08/15/2014	08/15/2014	105.00
4483 ~ City Lawn Corporation	8207	15-Resolution 14-15 CTP Maint. (440 DT)		08/05/2014	08/05/2014	08/15/2014	08/15/2014	25.00
4483 - City Lawn Corporation	8206	15-Resolution 14-15 CTP Maint, (440 DT)		08/05/2014	08/05/2014	08/15/2014	08/15/2014	80.00
4483 - City Lawn Corporation	8213	15-Resolution 14-15 CTP Maint. (440 DT)		08/05/2014	08/05/2014	08/15/2014	08/15/2014	80.00
4483 - City Lawn Corporation	8439	15-Resolution 14-15 CTP Maint. (440 DT)		08/05/2014	08/05/2014	08/15/2014	08/15/2014	80.00
4483 - City Lawn Corporation	8440	15-Resolution 14-15 CTP Maint. (440 DT)		08/05/2014	08/05/2014	08/15/2014	08/15/2014	50.00
4483 - City Lawn Corporation	8443	15-Resolution 14-15 CTP Maint. (440 DT)		08/05/2014	08/05/2014	08/15/2014	08/15/2014	80.00
3900 - Gibraltar Construction Corp	App 17	15-Resolution 12 37 Dispatch Const. (440)	Paid by Check # 58074	08/05/2014	08/05/2014	08/15/2014	08/15/2014	117,701.62
392 - Koorsen Fire & Security, INC	3278129	15-Resolution 11-28 M3 (440 DT)	Paid by EFT # 4013	08/05/2014	08/05/2014	08/15/2014	08/15/2014	157.95
		( . 10 01 )		- Other Services and C	harges Totals	Invoice Transaction	ns 10	\$121,059.57
				Program <b>150000</b>		Invoice Transaction	nc 10	\$121,059.57
				Department 15 -		Invoice Transaction	2.00 (0.70	\$121,059.57
				Fund 440 - TIF-Dow	intown Totals	Invoice Transaction	ns 10	\$121,059.57
Fund 442 - TIF - Tapp Road								
Department 15 - HAND								
Program 150000 - Main								
Account 53990 - Other Services and Char		15 D	Daild by FET #	00/05/2014	00/05/2014	00/15/2014	00/15/2014	105.00
4175 - The Stables Events, LLC (Izzy's Rentals)	1554.	15-Resolution 11-27 Wapahani - 442	Paid by EFT # 4064	08/05/2014	08/05/2014	08/15/2014	08/15/2014	105.00
			Account <b>53990</b>	- Other Services and C	harges Totals	Invoice Transaction	ns 1	\$105.00
				Program <b>150000</b>	- Main Totals	Invoice Transaction	ns 1	\$105.00
				Department 15 -	HAND Totals	Invoice Transaction	ns 1	\$105.00
				Fund 442 - TIF - Tap	p Road Totals	Invoice Transaction	ns 1	\$105.00
Fund 448 - TIF - Thomson Walnut Winslo Department 15 - HAND Program 150000 - Main Account 53990 - Other Services and Chan								
16 - Butler, Fairman And Seufert Inc	71603	15-TTF Claims for Resolution 13-31 (448)	Pald by Check # 58048	08/05/2014	08/05/2014	08/15/2014	08/15/2014	837.00
		,,		- Other Services and C	harges Totals	Involce Transaction	ns 1	\$837.00
				Program 150000	- Main Totals	Invoice Transaction	ns 1	\$837.00
				Department 15 -		Invoice Transaction		\$837.00
			Fund 449 - TT	F - Thomson Walnut W		Invoice Transaction		\$837.00
			1 UIIU 440 * 11	- I HOMESON TRAINING VY	Grand Totals	Invoice Transaction	-	7 1 30 10 10 10 10 10 10
					Grand Totals	Invoice Fransaction	15 32	\$189,125.62



### Board of Redevelopment Claim Register Invoice Date Range 07/28/14 - 07/30/14

Vendor	Invoice No.	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 440 - TIF-Downtown				-			201 <del>.</del>			
Department 15 - HAND										
Program 150000 - Main										
Account 53990 - Other Services and Ch	arges									
223 - Duke Energy	72302794023-	15-electric charges	Paid by Check		07/29/2014	07/29/2014	07/29/2014		07/29/2014	25.83
	7/18	#7230-2794-02-3-bill	# 58022							
			Account !	53990 - Other	Services and C	<b>harges</b> Totals	Inv	oice Transaction:	5 1	\$25.83
				P	rogram <b>150000</b>	- Main Totals	Inv	oice Transactions	5 1	\$25.83
				ł	Department 15 -	HAND Totals	Inv	oice Transaction:	s 1	\$25.83
				Fund	440 - TIF-Dow	ntown Totals	Inv	roice Transactions	s 1	\$25.83
						Grand Totals	Inv	oice Transaction	5 1	\$25.83

Date:	Type of Claim	FUND	Description	Bank Transfer	Amount
7/29/2014 8/15/2014	Sp Utility Cks Claims				25.83 189,125.62 189,151.45
		ALLOWAN	ICE OF CLAIMS		
claims, and ex total amount of		allowed as shown	egister of claims, consisting a on the register, such claims		in the state of th
	that each of the above I th IC 5-11-10-1.6.	isted voucher(s)	or bill(s) is (are) true and cor	rect and I have audited s	same in
		Fiscal Office_			

				Bank	
Date:	Type of Claim	FUND	Description	Transfer	Amount
7/29/2014 8/15/2014	Sp Utility Cks Claims				25.83 189,125.62 189,151.45
		ALLOWANG	E OF CLAIMS		
claims, and ex			gister of claims, consisting on the register such claim		e
Dated this _	day of	year of 20	·		
Mich	rel Genteto	No.			
	that each of the above In th IC 5-11-10-1.6	sted voucher(s) o	r bill(s) is (are) true and co	errect and I have audited s	same in
		Fiscal Office_		· · · · · · · · · · · · · · · · · · ·	

				Bank	
Date:	Type of Claim	FUND	Description	Transfer	Amount
7/29/2014 8/15/2014	Sp Utility Cks Claims				25.83 189,125.62 189,151,45
		ALLOWANG	CE OF CLAIMS		
claims, and ex			gister of claims, consisting on the register, such claim		he
Dated this _	day of	year of 20	•	De la	alte
	that each of the above th IC 5-11-10-1.6.	listed voucher(s) o	or bill(s) is (are) true and co	orrect and I have audited	same in
		Fiscal Office_			



### Board of Redevelopment Claim Register Invoice Date Range 08/19/14 - 08/29/14

Vendor	Invoice No.	Involce Description	Stati	us Held Re	eason I	nvoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amoun
Fund 101 - General Fund							-				
Department 15 - HAND											
Program 150500 - Housing											
Account 53960 - Grants	D Allocad	15.0101 don accit for 0	One	•	n	8/19/2014	08/19/2014	08/29/2014		09/20/2014	400.00
13380 - Arlington Park Apartments	P.Allgood	15-R101 dep. ass't for P.	000					Control Control Control Control Control		08/29/2014	
13380 - Arlington Park Apartments	R. Zaidi	15-R101-dep. ass't-R.	Ope			8/19/2014	08/19/2014	08/29/2014		08/29/2014	400.00
18692 - Country View Associates, LP	S. Ware	15-R101-rental dep	Ope			8/19/2014	08/19/2014	08/29/2014		08/29/2014	200.00
264 - Mckee, William D	Sec Dep-Wicker	C. Wicker-1015 W.				8/19/2014	08/19/2014	08/29/2014	,	08/29/2014	400.00
18718 - Monroe County CASA, INC	JHReimb	15-Jack Hopkins relmb-	Ope	n		8/19/2014	08/19/2014	08/29/2014		08/29/2014	1,913.57
4714 - Loretta F Patton	Security Dep	15-R101-apt sec. dep.	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	340.00
12129 - Stepping Stones, INC	JH Invaices	15-Jack Hopkins-inv. A.	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	3,689.36
	^				Accol	ant <b>53960 -</b>	Grants Totals	In	oice Transactions	s 7	\$7,342.93
					Program	150500 - H	ousing Totals	Inv	oice Transactions	s 7	\$7,342.93
Program 151000 - Neighborhood											
Account 52110 - Office Supplies											
383 - Maxwell's Office Supply	102686	15-tape, post it notes,	Ope	n	0	8/19/2014	08/19/2014	08/22/2014		08/29/2014	69.22
				Acc	ount <b>5211</b> 0	0 - Office Si	upplies Totals	Inv	oice Transactions	5 1	\$69.22
Account 53160 - Instruction											
4677 - International Code Council, INC	INV0461559	15-bldg code req	Ope	n	0	8/19/2014	08/19/2014	08/22/2014		08/29/2014	241.50
					Account 53	3160 - Inst	ruction Totals	Inv	roice Transactions	5 1	\$241.50
Account 53320 - Advertising											
323 - Hoosier Times, Inc	1720710	15-full run in HT-	Ope	n	0	8/19/2014	08/19/2014	08/22/2014		08/29/2014	39.10
					Account 53	3320 - Adve	ertising Totals	Inv	olce Transactions	5 1	\$39.10
Account 53960 - Grants											
50761 - Bloomington Sandwich Co, LLC	Citizens Academy	15-food for Citizen's Academy	Ope	ń	0	8/19/2014	08/19/2014	08/22/2014		08/29/2014	191,56
					Accou	ınt <b>53960</b> -	Grants Totals	Inv	oice Transactions	5 1	\$191.56
				Progr	ram <b>1510</b> 0	0 - Neighb	orhood Totals	Inv	oice Transactions	5 4	\$541.38
					Dep	artment 15 -	HAND Totals	lns	roice Transactions	5 11	\$7,884.31
					Fund 1	01 - Genera	al Fund Totals	lny	roice Transactions	5 11	\$7,884.31
Fund 250 - CDBG											4.700.1102
Department 15 - HAND											
Program 150000 - Main											
Account 53160 - Instruction											
1225 - Abbott, Lisa	Pkg-Training	15-reimb parking for	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	50.00
					Account 53	3160 - Inst	ruction Totals	Inv	oice Transactions	5 1	\$50.00
Account 53990 - Other Services and Char-	ges										
1959 - Clark Dietz Inc	414985	15-Rockport Road	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	18,087.50
47 - Community Kitchen Of Monroe County, INC	July Meals	15-July 2014 meal counts-Res. 14-29	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	2,501.00
12129 - Stepping Stones, INC	July-Payroll	15-July 2014 payroll	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	3,339.00
4699 - Larry N Stillwell	Report #14 FR133	15-Rockport Road- archaeological field	Ope	n	0	8/19/2014	08/19/2014	08/29/2014		08/29/2014	2,810.00
	11/133	archaeological field		Account 53990 -	Other Ser	vices and C	harges Totals	Inv	oice Transactions	. 4	\$26,737.50
*							- Main Totals		oice Transactions		\$26,787.50
					-		HAND Totals		oice Transactions		\$26,787.50
					Deb	ainiieiit 12 -	TIATED TOURS		once internations	, ,	\$20,707.50

					Fund 250	~ CDBG Totals	Invoice Transactio	ons 5	\$26,787.50
Fund 254 - HOME		•							
Department 15 - HAND Program 150000 - Main									
Account 53990 - Other Services and Chard	105								
223 - Duke Energy	Susie-8/7/14	15-2105 Susie Street-	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	9.40
121 - Eco Logic, LLC	2537	15-Evergreen Village	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	977.00
1785 - Monroe County Land Title Co Inc	717 Ralston	15-down	Open		08/19/2014	08/19/2014	BOOKS CONTRACTOR OF THE PROPERTY OF THE PROPER	08/29/2014	5,000.00
2,00	, ., , ,			Account 53990	- Other Services and O		Invoice Transaction	Contract to the second contract to	\$5,986.40
				, racount object	Program 150000	:5	Involce Transaction		\$5,986.40
					Department 15		Invoice Transaction		\$5,986.40
						- HOME Totals	Invoice Transaction		\$5,986.40
Fund 256 - Special Grants					10110 201		mirrore monoace		45,500.10
Department 15 - HAND									
Program 150009 - 2002 Shelter Plus Care									
Account 53990 - Other Services and Charg	jes						*		
421 - Centerstone	ShelterPlus Care	15-Shelter Plus Care- dated 8/12/14	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	3,401.00
				Account 53990	<ul> <li>Other Services and C</li> </ul>	Charges Totals	Invoice Transaction	ons 1	\$3,401.00
				Program 150	0009 - 2002 Shelter PI	us Care Totals	Invoice Transaction	ons 1	\$3,401.00
		*			Department 15	- HAND Totals	Invoice Transaction	ons 1	\$3,401.00
	6				Fund 256 - Special	<b>Grants</b> Totals	Invoice Transaction	ons 1	\$3,401.00
Fund 440 - TIF-Downtown									
Department 15 - HAND									
Program 150000 - Main Account 53990 - Other Services and Chard	***								
392 - Koorsen Fire & Security, INC	3291865	15-Buskirk Chumley	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	49.50
19618 - Old National Insurance, INC		15-premium due-301 S.	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	209.50
and the state of t	2,000.02010.12	Walnut blors risk policy	Opc		00/15/201	50/15/201	55/ 25/ 252 1	00/25/201	
				Account 53990	- Other Services and C	charges Totals	Invoice Transaction	ons 2	\$259.00
					Program <b>150000</b>	- Main Totals	Invoice Transaction	ons 2	\$259.00
					Department 15	- HAND Totals	Invoice Transaction	ons 2	\$259.00
					Fund 440 - TIF-Dov	vntown Totals	Involce Transactio	ons 2	\$259.00
Fund 975 - Surplus CTP Bond									
Department 15 - HAND		*							
Program 150000 - Main				×	3				
Account 53990 - Other Services and Charge 10 - Bledsoe Riggert & Guerrettaz, INC	13486	15-Tech Park-boundary	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	780.00
10 - Bledsoe Riggert & Guerrettaz, INC	13041	15-Tech Park-	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	2,625.00
4294 - Tim Klenck Demolition, LLC	App#4-1	15-Warehouse B	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	15,232.64
4294 - Tim Klenck Demolition, LLC	App #4-2	15-Warehouse B	Open		08/19/2014	08/19/2014	08/29/2014	08/29/2014	20,000.00
1251 Till Merick Demoidon, eec	CAP # 1 E	13 Warehouse D			- Other Services and C		Invoice Transaction		\$38,637.64
				ACCOUNT DE DE	Program 150000		Invoice Transactio		\$38,637.64
					Department 15		Invoice Transaction	· · · · · · · · · · · · · · · · · · ·	\$38,637.64
					Fund 975 - Surplus CT		Invoice Transaction	W.A=1 N	\$38,637.64
					, one 373 - Jui pius Ci	Grand Totals	Invoice Transactio		\$82,955.85
						GIOIN TOLDIS	Theoree Transactio	20	\$02,503.03



### Board of Redevelopment Claim Register Invoice Date Range 08/12/14 - 08/14/14

Vendor	Invoice No.	Involce Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Amount
Fund 254 - HOME										
Department 15 - HAND										
Program 150000 - Main										
Account 53990 - Other Services and Cha	irges		51							
208 - City Of Bloomington Utilities	2105Susie-	15-2105 S. Susie-	Paid by Check		08/12/2014	08/12/2014	08/12/2014		08/14/2014	18.21
	July14	water/sewer billing July	# 5361							
			Account	53990 - Other	r Services and C	harges Totals	Ir	voice Transactions	1	\$18.21
					Program 150000	- Main Totals	Ir	voice Transactions	1	\$18.21
					Department 15	HAND Totals	Ir	voice Transactions	1	\$18.21
					Fund 254 -	HOME Totals	In	voice Transactions	1	\$18.21
Fund 440 - TIF-Downtown					10.0 201	THE POLICE	-			710.21
Department 15 - HAND										
Program 150000 - Main										
Account 53990 - Other Services and Cha	raec.									
208 - City Of Bloomington Utilities		15-335 W. 11th-BL661-	Paid by Check		08/12/2014	08/12/2014	08/12/2014		08/14/2014	62,28
200 - City of Brownington bundes	333WII 2017 IT	water/sewer billing July	# 58156		00/12/2014	00/12/2014	00,12,2011		00/11/2014	02.20
208 - City Of Bloomington Utilities	601NMrtn-3ulv14	15-601 N. Morton-BL658-			08/12/2014	08/12/2014	08/12/2014		08/14/2014	42.23
250 240 510 510 510 510 510 510 510 510 510 51		water/sewer billing July	# 58155			334 334				
223 - Duke Energy	335W11-8/1/14	15-335 W. 11th-BL661-	Paid by Check	5	08/12/2014	08/12/2014	08/12/2014		08/14/2014	79.21
STORY IS SUPERIORATED # 1		elec billing 7/1-8/1/14	# 58158							
223 - Duke Energy	601NMrtn-	15-601 N. Morton-	Paid by Check		08/12/2014	08/12/2014	08/12/2014		08/14/2014	106.25
	8/5/14	electrical billing 7/1-	# 58158							
223 - Duke Energy	613Morton-	15-613 N. Morton-	Paid by Check	i.	08/12/2014	08/12/2014	08/12/2014		08/14/2014	9.40
	8/5/14	electrical billing 7/1-	# 58158	*						
223 - Duke Energy	10th/Rogers-8/5	15-10th & Rogers-light	Paid by Check	C.	08/12/2014	08/12/2014	08/12/2014		08/14/2014	21.40
		pole-electrical chgs 7/1-	# 58158	50000 011	6	T-1-1-		voice Transactions		4220 77
			Account		r Services and Cl		-		-	\$320.77
186					Program <b>150000</b>			voice Transactions		\$320.77
					Department 15 -	HAND Totals	In	voice Transactions	6.	\$320.77
				Fun	d 440 - TIF-Dow	ntown Totals	In	voice Transactions	6	\$320.77
						Grand Totals	In	voice Transactions	7	\$338.98

Date:	Type of Claim	FUND	Description	Bank Transfer	Amount
8/14/2014 8/29/2014	Sp Utility Cks Claims	9			338.98 82,955.85 83,294.86
		ALLOWAN	CE OF CLAIMS		
claims, and e			egister of claims, consisting on the register, such claim		ne
Dated this _	day of	year of 20	· · · · · · · · · · · · · · · · · · ·	Dul Wa	lta.
I herby certify	y that each of the above	Listed voucher(s)	or bill(s) is (are) true and co	orrect and I have audited	same in
accordance v	vith IC 5-11-10-1.6.				
		Fiscal Office			
(97					

# FAX 812 90:6 08/26/2014 TUE

### REGISTER OF SPECIAL CLAIMS

Date:	Type of Claim	FUND	Description	Bank Transfer	- Amount
8/14/2014 8/29/2014	Sp Utility Cks Claims				338.98 82,955.85 83,294.83
		ALLOWANG	CE OF CLAIMS		
claims, and ex total amount o		flowed as shown	gister of claims, consisting on the register, such claims	M X (3/1/1 (-7/1/2)	e e
	that each of the above li		or bill(s) is (are) true and con	rect and I have audited s	same in
	th IC 5-11-10-1.6.	sted vodener(s) b	bility is (are) live and con	reck and i have addited s	earre iii
		Fiscal Office_		· .	



				Bank	
Date:	Type of Claim	FUND	Description	Transfer	Amount
8/14/2014 8/29/2014	Sp Utility Cks Claims				338.98 82,955.85 83,294.83
		ALLOWAN	CE OF CLAIMS		
claims, and ex	cept for the claims not a		egister of claims, consisting on the register, such claims		e
				¥	
· · · · · · · · · · · · · · · · · · ·			<del></del>		
	that each of the above lith IC 5-11-10-1.6.	isted voucher(s)	or bill(s) is (are) true and cor	rrect and I have audited s	ame in
e e		Fiscal Office_			



Check Date Range 08/08/14 - 08/08/14 Detail Listing

		I	mputed								
Employee	Check Date	Gross	Income	EIC	Federal	FICA	Medicare	State	Othe <u>r</u>	Deductions	Net Pay
Department HAND - House	ing & Neighborho	ood Dev									
10000 Abbott, Lisa P 0782	08/08/2014	3,136.66		.00	400.55	185.08	43.29	98.09	30.29	411.27	1,968.09
			.00	.00	2,885.11	2,985.11	2,985.11	2,885.11	2,885.11		
	-	\$3,136.66		\$0.00	\$400.55	\$185.08	\$43.29	\$98.09	\$30.29	\$411.27	\$1,968.09
		, ,	\$0.00	\$0.00	\$2,885.11	\$2,985.11	\$2,985.11	\$2,885.11	\$2,885.11		
10000 Arnold, Michael L 0051	08/08/2014	1,665.60		.00	188.83	99.09	23.18	53.03	16.38	91.68	1,193.41
			.00	.00	1,598.30	1,598.30	1,598.30	1,598.30	1,598.30		
		\$1,665.60		\$0.00	\$188.83	\$99.09	\$23.18	\$53.03	\$16.38	\$91.68	\$1,193.41
			\$0.00	\$0.00	\$1,598.30	\$1,598.30	\$1,598.30	\$1,598.30	\$1,598.30		
10000 Bixler, Daniel R 2594	08/08/2014	1,191.22		.00	113.22	67.84	15.86	35.90	11.09	114.45	832.86
2371			.00	.00	1,094.20	1,094.20	1,094.20	1,094.20	1,094.20		
		\$1,191.22		\$0.00	\$113.22	\$67.84	\$15.86	\$35.90	\$11.09	\$114.45	\$832.86
			\$0.00	\$0.00	\$1,094.20	\$1,094.20	\$1,094.20	\$1,094.20	\$1,094.20		
782 Brewer, Joshua A	08/08/2014	115.00		.00	3.04	7.13	1.67	3.91	1.21	.00	98.04
			.00	.00	115.00	115.00	115.00	115.00	115.00		
		\$115.00		\$0.00	\$3.04	\$7.13	\$1.67	\$3.91	\$1.21	\$0.00	\$98.04
			\$0.00	\$0.00	\$115.00	\$115.00	\$115.00	\$115.00	\$115.00		
10000 Finley, Christina L 0187	08/08/2014	1,396.34		.00	154.22	76.70	17.94	40.42	12.89	183.10	911.07
			.00	.00	1,227.14	1,237.14	1,237.14	1,227.14	1,227.14		
		\$1,396.34		\$0.00	\$154.22	\$76.70	\$17.94	\$40.42	\$12.89	\$183.10	\$911.07
			\$0.00	\$0.00	\$1,227.14	\$1,237.14	\$1,237.14	\$1,227.14	\$1,227.14		
307 Franklin, C. Jacob	08/08/2014	1,060.80		.00	121.44	62.54	14.62	34.29	10.59	55.79	761.53
			.00	.00	1,008.67	1,008.67	1,008.67	1,008.67	1,008.67		
		\$1,060.80		\$0.00	\$121.44	\$62.54	\$14.62	\$34.29	\$10.59	\$55.79	\$761.53
		1-/	\$0.00	\$0.00	\$1,008.67	\$1,008.67	\$1,008.67	\$1,008.67	\$1,008.67	,	
10000 Hewett, John H 0251	08/08/2014	1,776.64		.00	202.12	97.31	22.76	51.66	15.95	296.45	1,090.39
			.00	.00	1,519.44	1,569.44	1,569.44	1,519.44	1,519.44		
		\$1,776.64		\$0.00	\$202.12	\$97.31	\$22.76	\$51.66	\$15.95	\$296.45	\$1,090.39
			\$0.00	\$0.00	\$1,519.44	\$1,569.44	\$1,569.44	\$1,519.44	\$1,519.44		



Check Date Range 08/08/14 - 08/08/14 Detail Listing

<i>y</i> 3			Imputed								
Employee	_ Check Date		Income	EIC_	Federal	FICA	Medicare	State	Other	Deductions	Net Pay
Department HAND - Housi	_										
10000 Hiestand, Nancy A 0252	08/08/2014	1,811.07		.00	189.41	108.04	25.27	56.63	17.49	127.55	1,286.68
0232			.00	.00	1,742.57	1,742.57	1,742.57	1,742.57	1,742.57		
	_	\$1,811.07		\$0.00	\$189.41	\$108.04	\$25.27	\$56.63	\$17.49	\$127.55	\$1,286.68
		\$1,011.07	\$0.00	\$0.00	\$1,742.57	\$1,742.57	\$1,742.57	\$1,742.57	\$1,742.57	\$127.55	\$1,200.00
			ψ0.00								
797 Hinnefeld, Kevin	08/08/2014	100.00	00	.00	.00	6.20	1.44	2.09	.65	.00	89.62
	_		.00	.00	100.00	100.00	100.00	100.00	100.00		
		\$100.00		\$0.00	\$0.00	\$6.20	\$1.44	\$2.09	\$0.65	\$0.00	\$89.62
			\$0.00	\$0.00	\$100.00	\$100.00	\$100.00	\$100.00	\$100.00		
10000 McCormick, Maria 3616	08/08/2014	1,377.23		.00	34.57	76.04	17.78	41.70	12.88	166.47	1,027.79
3010			.00	.00	1,226.43	1,226.43	1,226.43	1,226.43	1,226.43		
	_	\$1,377.23		\$0.00	\$34.57	\$76.04	\$17.78	\$41.70	\$12.88	\$166.47	\$1,027.79
			\$0.00	\$0.00	\$1,226.43	\$1,226.43	\$1,226.43	\$1,226.43	\$1,226.43		
10000 Mosier, Norman P 2962	08/08/2014	1,391.01		.00	170.84	82.95	19.40	45.49	14.05	74.86	983.42
2302			.00	.00	1,337.96	1,337.96	1,337.96	1,337.96	1,337.96		
	_	\$1,391.01		\$0.00	\$170.84	\$82.95	\$19.40	\$45.49	\$14.05	\$74.86	\$983.42
			\$0.00	\$0.00	\$1,337.96	\$1,337.96	\$1,337.96	\$1,337.96	\$1,337.96		
689 Niederman, Daniel L	08/08/2014	1,692.31		.00	139.41	94.70	22.15	48.93	15.11	220.39	1,151.62
	00,00,202.	-,052.0-	.00	.00	1,477.47	1,527.47	1,527.47	1,477.47	1,477.47		-,
	<u></u>	\$1,692.31		\$0.00	\$139.41	\$94.70	\$22.15	\$48.93	\$15.11	\$220.39	\$1,151.62
		4-2-5-	\$0.00	\$0.00	\$1,477.47	\$1,527.47	\$1,527.47	\$1,477.47	\$1,477.47	,	, , ,
10000 Patterson, Marilyn	08/08/2014	2,326.15	or produced the second	.00	348.34	139.77	32.69	71.55	22.10	268.05	1,443.65
2071											
	_		.00	.00	2,104.33	2,254.33	2,254.33	2,104.33	2,104.33		
		\$2,326.15		\$0.00	\$348.34	\$139.77	\$32.69	\$71.55	\$22.10	\$268.05	\$1,443.65
			\$0.00	\$0.00	\$2,104.33	\$2,254.33	\$2,254.33	\$2,104.33	\$2,104.33		
10000 Provine, Vickie J 0394	08/08/2014	1,918.67		.00	276.71	112.71	26.36	61.81	19.09	117.48	1,304.51
0001			.00	.00	1,817.81	1,817.81	1,817.81	1,817.81	1,817.81		
		\$1,918.67		\$0.00	\$276.71	\$112.71	\$26.36	\$61.81	\$19.09	\$117.48	\$1,304.51
		201 10	\$0.00	\$0.00	\$1,817.81	\$1,817.81	\$1,817.81	\$1,817.81	\$1,817.81		



Check Date Range 08/08/14 - 08/08/14 Detail Listing

			Imputed								
Employee	Check Date		Income	EIC	Federal	FICA	Medicare	State	Other	Deductions	Net Pay
Department HAND - Hous	ing & Neighborh	ood Dev									
10000 Stong, Mary J	08/08/2014	1,429.75		.00	167.64	83.18	19.45	44.77	13.82	179.14	921.75
0471											
			.00	.00	1,316.63	1,341.63	1,341.63	1,316.63	1,316.63		
	_	\$1,429.75		\$0.00	\$167.64	\$83.18	\$19.45	\$44.77	\$13.82	\$179.14	\$921.75
			\$0.00	\$0.00	\$1,316.63	\$1,341.63	\$1,341.63	\$1,316.63	\$1,316.63		
10000 Wills, Dee A 3418	08/08/2014	1,356.87		.00	166.15	81.64	19.10	44.43	13.72	68.67	963.16
			.00	.00	1,306.70	1,316.70	1,316.70	1,306.70	1,306.70		
	_	\$1,356.87		\$0.00	\$166.15	\$81.64	\$19.10	\$44.43	\$13.72	\$68.67	\$963.16
			\$0.00	\$0.00	\$1,306.70	\$1,316.70	\$1,316.70	\$1,306.70	\$1,306.70		
10000 Woolford, Robert T 0531	08/08/2014	1,842.92		.00	66.13	85.97	20.11	17.22	5.32	1,389.93	258.24
			.00	.00	506.59	1,386.59	1,386.59	506.59	506.59		
	_	\$1,842.92		\$0.00	\$66.13	\$85.97	\$20.11	\$17.22	\$5.32	\$1,389.93	\$258.24
			\$0.00	\$0.00	\$506.59	\$1,386.59	\$1,386.59	\$506.59	\$506.59		
728 Wright, Edward E	08/08/2014	988.00		.00	96.30	52.14	12.20	33.60	.00	157.33	636.43
• • • • • • • • • • • • • • • • • • • •			.00	.00	841.03	841.03	841.03	841.03	841.03		
	-	\$988.00		\$0.00	\$96.30	\$52.14	\$12.20	\$33.60	\$0.00	\$157.33	\$636.43
		1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\$0.00	\$0.00	\$841.03	\$841.03	\$841.03	\$841.03	\$841.03		
Department HANI	D - Housing &	\$26,576.24		\$0.00	\$2,838.92	\$1,519.03	\$355.27	\$785.52	\$232.63	\$3,922.61	\$16,922.26
	_		\$0.00	\$0.00	\$23,225.38	\$24,500.38	\$24,500.38	\$23,225.38	\$23,225.38		
	Grand Totals	\$26,576.24		\$0.00	\$2,838.92	\$1,519.03	\$355.27	\$785.52	\$232.63	\$3,922.61	\$16,922.26
			\$0.00	\$0.00	\$23,225.38	\$24,500.38	\$24,500.38	\$23,225.38	\$23,225.38		

\*\*\*\*\* Multiple Taxes or Deductions Exist.

				Bank	
Date:	Type of Claim	FUND	Description	Transfer	Amount
8/8/2014	Payroll				26,576.24
					26,576.24
		ALLOWANC	E OF CLAIMS		
	cept for the claims not all		ister of claims, consisting the register, such claims	of <b>1</b> are hereby allowed in the	
Dated this _	day of	year of 20			
I herby certify	that each of the above I	isted voucher(s) o	r hill(s) is (are) true and co	rrect and I have audited s	ame in
	ith IC 5-11-10-1.6.	10100 10001101(0) 01	Sin(o) to (are) true and oc	Treet and Thave addited 5	arrio in
		Fiscal Office			



Check Date Range 08/22/14 - 08/22/14 Detail Listing

		I	mputed								
Employee	Check Date		Income	EIC	Federal	FICA	Medicare	State	Other	Deductions	Net Pay
Department HAND - Hous											
10000 Abbott, Lisa P 0782	08/22/2014	3,136.67		.00	400.56	185.07	43.28	98.09	30.29	411.27	1,968.11
			.00	.00	2,885.12	2,985.12	2,985.12	2,885.12	2,885.12		
	-	\$3,136.67		\$0.00	\$400.56	\$185.07	\$43.28	\$98.09	\$30.29	\$411.27	\$1,968.11
			\$0.00	\$0.00	\$2,885.12	\$2,985.12	\$2,985.12	\$2,885.12	\$2,885.12		
10000 Arnold, Michael L 0051	08/22/2014	1,665.59		.00	188.83	99.10	23.17	53.03	16.38	91.68	1,193.40
			.00	.00	1,598.29	1,598.29	1,598.29	1,598.29	1,598.29		
	,	\$1,665.59	-	\$0.00	\$188.83	\$99.10	\$23.17	\$53.03	\$16.38	\$91.68	\$1,193.40
			\$0.00	\$0.00	\$1,598.29	\$1,598.29	\$1,598.29	\$1,598.29	\$1,598.29		
10000 Bixler, Daniel R 2594	08/22/2014	491.38		.00	16.94	24.45	5.72	12.10	3.74	114.45	313.98
2334			.00	.00	394.36	394.36	394.36	394.36	394.36		
	· <del>-</del>	\$491.38		\$0.00	\$16.94	\$24.45	\$5.72	\$12.10	\$3.74	\$114.45	\$313.98
			\$0.00	\$0.00	\$394.36	\$394.36	\$394.36	\$394.36	\$394.36		
782 Brewer, Joshua A	08/22/2014	167.50		.00	8.29	10.39	2.43	5.70	1.76	.00	138.93
·			.00	.00	167.50	167.50	167.50	167.50	167.50		
	_	\$167.50		\$0.00	\$8.29	\$10.39	\$2.43	\$5.70	\$1.76	\$0.00	\$138.93
			\$0.00	\$0.00	\$167.50	\$167.50	\$167.50	\$167.50	\$167.50		
10000 Finley, Christina L 0187	08/22/2014	1,396.34		.00	154.22	76.71	17.94	40.42	12.89	183.10	911.06
V-20.			.00	.00	1,227.14	1,237.14	1,237.14	1,227.14	1,227.14		
	-	\$1,396.34		\$0.00	\$154.22	\$76.71	\$17.94	\$40.42	\$12.89	\$183.10	\$911.06
			\$0.00	\$0.00	\$1,227.14	\$1,237.14	\$1,237.14	\$1,227.14	\$1,227.14		
307 Franklin, C. Jacob	08/22/2014	1,060.80		.00	121.44	62.54	14.63	34.29	10.59	55.79	761.52
~			.00	.00	1,008.67	1,008.67	1,008.67	1,008.67	1,008.67		
	_	\$1,060.80		\$0.00	\$121.44	\$62.54	\$14.63	\$34.29	\$10.59	\$55.79	\$761.52
			\$0.00	\$0.00	\$1,008.67	\$1,008.67	\$1,008.67	\$1,008.67	\$1,008.67	8 *COSC(\$45, \$90) 50°	• *************************************
10000 Hewett, John H 0251	08/22/2014	1,776.64		.00	202.12	97.30	22.76	51.66	15.95	296.45	1,090.40
0231			.00	.00	1,519.44	1,569.44	1,569.44	1,519.44	1,519.44		
	_	\$1,776.64		\$0.00	\$202.12	\$97.30	\$22.76	\$51.66	\$15.95	\$296.45	\$1,090.40
			\$0.00	\$0.00	\$1,519.44	\$1,569.44	\$1,569.44	\$1,519.44	\$1,519.44		



Check Date Range 08/22/14 - 08/22/14 Detail Listing

		I	mputed								
Employee	Check Date	Gross	Income	EIC_	Federal	FICA	<u>Me</u> dicare	State	Other	Deductions	Net Pay
Department HAND - Housin											
10000 Hiestand, Nancy A 0252	08/22/2014	1,811.07		.00	189.41	108.04	25.27	56.63	17.49	127.55	1,286.68
			.00	.00	1,742.57	1,742.57	1,742.57	1,742.57	1,742.57		
	_	\$1,811.07	\$0.00	\$0.00 \$0.00	\$189.41 \$1,742.57	\$108.04 \$1,742.57	\$25.27 \$1,742.57	\$56.63 \$1,742.57	\$17.49 \$1,742.57	\$127.55	\$1,286.68
797 Hinnefeld, Kevin	08/22/2014	190.00	.00	.00	.00 190.00	11.78 190.00	2.76 190.00	5.15 190.00	1.59 190.00	.00	168.72
	_	\$190.00	\$0.00	\$0.00 \$0.00	\$0.00 \$190.00	\$11.78 \$190.00	\$2.76 \$190.00	\$5.15 \$190.00	\$1.59 \$190.00	\$0.00	\$168.72
10000 McCormick, Maria 3616	08/22/2014	1,377.23		.00	34.57	76.04	17.79	41.70	12.88	166.47	1,027.78
			.00	.00	1,226.43	1,226.43	1,226.43	1,226.43	1,226.43		
	_	\$1,377.23	\$0.00	\$0.00 \$0.00	\$34.57 \$1,226.43	\$76.04 \$1,226.43	\$17.79 \$1,226.43	\$41.70 \$1,226.43	\$12.88 \$1,226.43	\$166.47	\$1,027.78
10000 Mosier, Norman P 2962	08/22/2014	1,391.01		.00	170.84	82.95	19.40	45.49	14.05	74.86	983.42
			.00	.00	1,337.96	1,337.96	1,337.96	1,337.96	1,337.96		
	_	\$1,391.01	\$0.00	\$0.00 \$0.00	\$170.84 \$1,337.96	\$82.95 \$1,337.96	\$19.40 \$1,337.96	\$45.49 \$1,337.96	\$14.05 \$1,337.96	\$74.86	\$983.42
689 Niederman, Daniel L	08/22/2014	1,692.31	.00	.00 .00	139.41 1,477.47	94.70 1,527.47	22.15 1,527.47	48.93 1,477.47	15.11 1,477.47	220.39	1,151.62
	_	\$1,692.31	\$0.00	\$0.00 \$0.00	\$139.41 \$1,477.47	\$94.70 \$1,527.47	\$22.15 \$1,527.47	\$48.93 \$1,477.47	\$15.11 \$1,477.47	\$220.39	\$1,151.62
10000 Patterson, Marilyn 2071	08/22/2014	2,326.15		.00	348.34	139.76	32.69	71.55	22.10	268.05	1,443.66
			.00	.00	2,104.33	2,254.33	2,254.33	2,104.33	2,104.33		
	_	\$2,326.15	\$0.00	\$0.00 \$0.00	\$348.34 \$2,104.33	\$139.76 \$2,254.33	\$32.69 \$2,254.33	\$71.55 \$2,104.33	\$22.10 \$2,104.33	\$268.05	\$1,443.66
10000 Provine, Vickie J	08/22/2014	1,918.67	φ0.00	.00	276.71	112.70	26.36	61.81	19.09	117.48	1,304.52
0394	_		.00	.00	1,817.81	1,817.81	1,817.81	1,817.81	1,817.81		
		\$1,918.67	\$0.00	\$0.00 \$0.00	\$276.71 \$1,817.81	\$112.70 \$1,817.81	\$26.36 \$1,817.81	\$61.81 \$1,817.81	\$19.09 \$1,817.81	\$117.48	\$1,304.52



Check Date Range 08/22/14 - 08/22/14 Detail Listing

			Imputed			(100m) (100m)	1980 20	EX.			
Employee  Department HAND - Housin	Check Date		Income	EIC	Federal	FICA	Medicare	State	Other	Deductions	Net Pay
10000 Stong, Mary J 0471	08/22/2014	1,429.75		.00	167.64	83.18	19.45	44.77	13.82	179.14	921.75
			.00	.00	1,316.63	1,341.63	1,341.63	1,316.63	1,316.63		
	_	\$1,429.75	overse represe	\$0.00	\$167.64	\$83.18	\$19.45	\$44.77	\$13.82	\$179.14	\$921.75
			\$0.00	\$0.00	\$1,316.63	\$1,341.63	\$1,341.63	\$1,316.63	\$1,316.63		
504 Swinney, Matthew P	08/22/2014	1,326.92	.00	.00 .00	127.75 1,331.50	82.55 1,331.50	19.31 1,331.50	43.96 1,331.50	13.58 1,331.50	8.52	1,031.25
	_	\$1,326.92	\$0.00	\$0.00 \$0.00	\$127.75 \$1,331.50	\$82.55 \$1,331.50	\$19.31 \$1,331.50	\$43.96 \$1,331.50	\$13.58 \$1,331.50	\$8.52	\$1,031.25
10000 Wills, Dee A 3418	08/22/2014	1,356.88		.00	166.15	81.63	19.09	44.43	13.72	68.67	963.19
			.00	.00	1,306.71	1,316.71	1,316.71	1,306.71	1,306.71		
		\$1,356.88	\$0.00	\$0.00 \$0.00	\$166.15 \$1,306.71	\$81.63 \$1,316.71	\$19.09 \$1,316.71	\$44.43 \$1,306.71	\$13.72 \$1,306.71	\$68.67	\$963.19
10000 Woolford, Robert T 0531	08/22/2014	1,842.92		.00	66.13	85.97	20.10	17.22	5.32	1,389.93	258.25
			.00	.00	506.59	1,386.59	1,386.59	506.59	506.59		
	_	\$1,842.92	\$0.00	\$0.00 \$0.00	\$66.13 \$506.59	\$85.97 \$1,386.59	\$20.10 \$1,386.59	\$17.22 \$506.59	\$5.32 \$506.59	\$1,389.93	\$258.25
728 Wright, Edward E	08/22/2014	988.00	.00	.00 .00	96.30 841.03	52.15 841.03	12.19 841.03	33.60 841.03	.00 841.03	157.33	636.43
	_	\$988.00	\$0.00	\$0.00 \$0.00	\$96.30 \$841.03	\$52.15 \$841.03	\$12.19 \$841.03	\$33.60 \$841.03	\$0.00 \$841.03	\$157.33	\$636.43
Department <b>HAND</b>	- Housing &	\$27,345.83	\$0.00	\$0.00 \$0.00	\$2,875.65 \$23,999.55	\$1,567.01 \$25,274.55	\$366.49 \$25,274.55	\$810.53 \$23,999.55	\$240.35 \$23,999.55	\$3,931.13	\$17,554.67
	Grand Totals	\$27,345.83	\$0.00	\$0.00 \$0.00	\$2,875.65 \$23,999.55	\$1,567.01 \$25,274.55	\$366.49 \$25,274.55	\$810.53 \$23,999.55	\$240.35 \$23,999.55	\$3,931.13	\$17,554.67
**** Multiple Tayon or Dodu	etione Eviet		T	т =	,,,,,,,,,	1/	7/	7-0,000	420,000.00		

\*\*\*\*\* Multiple Taxes or Deductions Exist.

				Bank	
Date:	Type of Claim	FUND	Description	Transfer	Amount
8/22/2014	Payroll				27,345.83
					27,345.83
		ALLOWAN	ICE OF CLAIMS		
	cept for the claims not all		egister of claims, consisting on the register, such claims		:
Dated this _	day of Augur	tyear of 20_1	ц.		
Supon	M. Szamballi	w <u>,</u>	· · · · · ·		
I herby certify	that each of the above li	sted voucher(s)	or bill(s) is (are) true and co	rrect and I have audited s	same in
	ith IC 5-11-10-1.6.	2.22 .2300.(0)	2. 2(2) 12 (2.0) 0 00 0 010 00		
		Fiscal Office_		<u> </u>	

Board: Redevelopment Claim Register

Bank

Date:	Type of Claim	FUND	Description	Transfer
8/22/2014	Payroll			
		ALLOWAN	ICE OF CLAIMS	
claim, and exce total amount of	ept for the claims not all f 27,345.83	owed as shown	egister of claims, consisting o on the register, such claims a	
Dated this 2	day of Aug	year of 20 <u>/</u>	<u>4</u> .	
	that each of the above the thing to the things of the thin	isted voucher(s)	or bill(s) is (are) true and corr	ect and I have
		Fiscal Office		

Date:	Type of Claim	FUND	Description	Transfer	Amount
	7,00	10110	Вессириси		Allount
8/22/2014	Payroll				27,345.83
					世界的企業法
		ALLOWANG	CE OF CLAIMS		
claim, and exc			gister of claims, consisting n the register, such claims		the
Dated this _	day of	year of 20		Dullb	the
	that each of the above th IC 5-11-10-1.6.	listed voucher(s) o	or bill(s) is (are) true and co	orrect and I have audit	ed same in
		Fiscal Office_			



### Memo

To:

Redevelopment Commission

From:

Lisa Abbott, Director

Date:

September 5, 2014

The Comprehensive Annual Performance Evaluation Report (CAPER) has been submitted to HUD. We continue to work on the Consolidated Plan 2015-2019. We will send you the dates/times for our focus groups in the next couple of weeks.

The City has welcomed its new controller, Jeff Underwood. I will ask him to attend the first meeting date he has available so you can meet him.

As you can imagine, most of August in HAND is dedicated to our rental inspection program. To date, we have inspected 5,816 units. The compliance officers are spending a lot of time talking to the new residents about our enforcement programs.

I will be on vacation starting September 9th. If you need assistance, please call either Christina or Marilyn.

#### Upcoming activity:

Home Buyer's Club September 13 & 20th

# 14-39 RESOLUTION OF THE REDEVELOPMENT COMMISSION OF THE CITY OF BLOOMINGTON, INDIANA

**WHEREAS,** funds are available under Community Development Block Grant funds (CFDA # 14.218) under Grant No. B-14-MC-18-0013, and,

**WHEREAS,** Funding Agreements were approved by the Redevelopment Commission under Resolutions 14-25 through 14-33, and

**WHEREAS,** per HUD guidelines each of these funding agreements under Resolutions 14-25 through 14-33 must be modified to include the following language:

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial assistance (as defined at 2 CFR 170.320) and \$25,000,000 or more in annual gross revenues from Federal contracts and federal financial assistance (as defined at 2 CFR 170.320); and if the public does not have access to this information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986.

The Grantee may certify that it received less than eighty percent (80%) of annual gross revenues from the federal government, received less than \$25,000,000 of its annual gross revenues from the federal government, already provides executive compensation to the Securities Exchange Commission, or meets the Internal Revenue Code exemption, and will not be required to submit executive compensation data into the SAM under FFATA, provided, that the Grantee shall still register and submit the other data requested

2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review, and,

**WHEREAS,** modifications to each of the said Funding Agreements under Resolutions 14-25 through 14-33 have been prepared for the purpose of incorporating said HUD language into each Funding Agreement.

### NOW, THEREFORE, BE IT RESOLVED BY THE BLOOMINGTON REDEVELOPMENT COMMISSION THAT:

The Modifications to the above referenced Funding Agreements under Resolutions 14-25 through 14-33 are accepted and approved.

### BE IT FURTHER RESOLVED BY THE BLOOMINGTON REDEVELOPMENT COMMISSION THAT:

Except as set forth in the Modifications, the Funding Agreements under Resolutions 14-25 through 14-33 are unaffected and shall continue in full force and effect in accordance with their respective terms and conditions. However, in the event of any conflict between any Modification to any Funding Agreement or any earlier amendments, the terms of the Modification shall prevail.

#### **BLOOMINGTON REDEVELOPMENT COMMISSION**

David Walter, President	
ATTEST:	
Michael Gentile, Secretary	
Date	

### MODIFICATION OF COMMUNITY DEVELOPMENT BLOCK GRANT AGREEMENT BETWEEN

### COMMUNITY KITCHEN OF MONROE COUNTY, INC.

#### AND

### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborh	ood Developm	ent Department ("Grantee") and
Community Kitchen of Monroe County, In	nc. ("Subrecipi	ent").

WHEREAS, on July 9, 2014 the Community Kitchen and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to provide Distribute free, nutritious, hot and cold meals to anyone in need, six days per week from two locations (1515 South Rogers and 1100 West 11<sup>th</sup>).

WHEREAS, the Grantee wishes to amend that agreement to include:

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual

gross revenues from Federal contracts and Federal financial assistance (as defined at 2 CFR 170.320) and \$25,000,000 or more in annual gross revenues from Federal contracts and federal financial assistance (as defined at 2 CFR 170.320); and if the public does not have access to this information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. The Grantee may certify that it received less than eighty percent (80%) of annual gross revenues from the federal government, received less than \$25,000,000 of its annual gross revenues from the federal government, already provides executive compensation to the Securities Exchange Commission, or meets the Internal Revenue Code exemption, and will not be required to submit executive compensation data into the SAM under FFATA, provided, that the Grantee shall still register and submit the other data requested

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Communication and details concerning this amendment shall be directed to the following contract representatives:

Grantee:	Subrecipient:
Marilyn Patterson, Assistant Director	Community Kitchen of Monroe County, Inc.
Housing and Neighborhood	Vicki Pierce, Executive Director
Development	P.O. Box 3286
City of Bloomington	Bloomington, Indiana 47402
P.O. Box 100	Tel: (812) 332-0999
Bloomington, Indiana 47402	Fax: (812) 332-1937
Tel: (812) 349-3401	
Fax: (812) 349-3582	

IN WITNESS WHEREOF, the Parties have executed this contract as of the date first written above.

REDEVELOPMENT COMMISSION		COMMUNITY KITCHEN OF MONROE COUNTY, INC.	
By: _	David Walter, President	By: Vicki Pierce, Executive Director	
Ву: _			
	Michael Gentile, Secretary		

#### **MODIFICATION OF**

### COMMUNITY DEVELOPMENT BLOCK GRANT AGREEMENT

### BETWEEN

#### **STEPPING STONES**

AND

### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of,	2014 by and between the City
of Bloomington's Housing and Neighborhood	Development Depart	artment ("Grantee") and
STEPPING STONES ("Subrecipient").		

WHEREAS, on July 11, 2014, the STEPPING STONES and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to house at risk youth and provide those youth with supportive services.

WHEREAS, the Grantee wishes to amend that agreement to include:

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

assistance (as defined at 2 CFR 170.320) and \$25,000,000 or more in annual gross revenues from Federal contracts and federal financial assistance (as defined at 2 CFR 170.320); and if the public does not have access to this information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. §§ 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986. The Grantee may certify that it received less than eighty percent (80%) of annual gross revenues from the federal government, received less than \$25,000,000 of its annual gross revenues from the federal government, already provides executive compensation to the Securities Exchange Commission, or meets the Internal Revenue Code exemption, and will not be required to submit executive compensation data into the SAM under FFATA, provided, that the Grantee shall still register and submit the other data requested

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Communication and details concerning this amendment shall be directed to the following contract representatives:

Grantee:	Subrecipient:
Marilyn Patterson, Assistant Director	STEPPING STONES
Housing and Neighborhood	Melinda Caron, Executive Director
Development	P.O. Box 1366
City of Bloomington	Bloomington, Indiana 47402
P.O. Box 100	Tel: (812) 333-7404
Bloomington, Indiana 47402	Fax: (812) 323-9063
Tel: (812) 349-3401	
Fax: (812) 349-3582	

IN WITNESS WHEREOF, the Parties have executed this contract as of the date first written above.

REDEVELOPMENT COMMISSION	STEPPING STONES	
By:	By: Melinda Caron, Executive Director	
By:Michael Gentile, Secretary		

#### HOOSIER HILLS FOOD BANK, INC.

AND

#### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborho	ood Developm	ent Department ("Grantee") and
Hoosier Hills Food Bank, Inc. ("Subrecipie	ent").	

WHEREAS, on July 10, 2014, the Hoosier Hills Food Bank and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to collect, sort, store and distribute food to community nonprofits.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Grantee:	Subrecipient:	
Marilyn Patterson, Assistant Director	Hoosier Hills Food Bank, Inc.	
Housing and Neighborhood	Julio Alanso, Executive Director	
Development	P.O. Box 697	
City of Bloomington	Bloomington, Indiana 47402	
P.O. Box 100	Tel: (812) 334-8374	
Bloomington, Indiana 47402	Fax: (812) 334-8377	
Tel: (812) 349-3401		
Fax: (812) 349-3582		

IN WITNESS WHEREOF, the Parties have executed this contract as of the date first written above.

REDEVELOPMENT COMMISSION HOOSIER HILLS FOOD BANK, INC.

By: \_\_\_\_\_\_\_ By: \_\_\_\_\_\_ Julio Alanso, Executive Director

By: \_\_\_\_\_\_ Michael Gentile, Secretary

#### **MODIFICATION OF**

#### COMMUNITY DEVELOPMENT BLOCK GRANT AGREEMENT

#### BETWEEN

#### MONROE COUNTY UNITED MINISTRIES

AND

### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborho	od Developm	ent Department ("Grantee") and
MONROE COUNTY UNITED MINISTRIES ("Su	brecipient").	

WHEREAS, on July 10, 2014, the MONROE COUNTY UNITED MINISTRIES and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to provide emergency sheltering services.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Grantee:	Subrecipient:	
Marilyn Patterson, Assistant Director	MONROE COUNTY UNITED MINISTRIES	
Housing and Neighborhood	Marietta Reinhold, Executive Director	
Development	827 W 14th Street	
City of Bloomington	Bloomington, Indiana 47404	
P.O. Box 100	Tel: (812) 339-3429	
Bloomington, Indiana 47402	Fax: (812) 339-2912	
Tel: (812) 349-3401		
Fax: (812) 349-3582		

IN WITNESS WHEREOF, the Parties have executed this contract as of the date first written above.

abov <b>RED</b>	e. EVELOPMENT COMMISSION	MONROE COUNTY UNITED MINISTRIES
By: <sub>-</sub>	David Walter, President	By: Marietta Reinhold, Executive Director
By: _	Michael Gentile, Secretary	

#### MIDDLE WAY HOUSE, INC.

AND

### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborho	od Developn	nent Department ("Grantee") and
Middle Way House, Inc. ("Subrecipient").		

WHEREAS, on July 10, 2014, the Middle Way House, Inc. and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to provide emergency sheltering services.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at www.sam.gov.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial assistance (as defined at 2 CFR 170.320) and \$25,000,000 or more

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Communication and details concerning this amendment shall be directed to the following contract representatives:

Grantee:	Subrecipient:	
Marilyn Patterson, Assistant Director	Middle Way House, Inc.	
Housing and Neighborhood	Toby Strout, Executive Director	
Development	338 S. Washington Street	
City of Bloomington	Bloomington, Indiana 47401	
P.O. Box 100	Tel: (812) 333-7404	
Bloomington, Indiana 47402	Fax: (812) 323-9063	
Tel: (812) 349-3401		
Fax: (812) 349-3582		

IN WITNESS WHEREOF, the Parties have executed this contract as of the date first written above.

REDEVELOPMENT COMMISSION	MIDDLE WAY HOUSE, INC.		
By:	By:		
David Walter, President	Toby Strout, Executive Director		
By:			
Michael Gentile, Secretary			

#### AMETHYST HOUSE, INC.

AND

#### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborh	nood Developm	nent Department ("Grantee") and
Amethyst House, Inc. ("Subrecipient").		

WHEREAS, on July 31, 2014 Amethyst House, Inc. and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to install storm windows, replace siding as required, paint, gutters and other improvements at the facility located at 416 W. 4th St.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Grantee:	Subrecipient:
Robert Woolford, Program Manager	Mark DeLong, Executive Director
Housing and Neighborhood	Amethyst House, Inc
Development	647 N. Walnut Street
City of Bloomington	Bloomington, Indiana 47408
P.O. Box 100	Tel: (812) 336-3570
Bloomington, Indiana 47402	
Tel: (812) 349-3401	
Fax: (812) 349-3582	

IN WITNESS WHEREOF, the Parties have eabove.  REDEVELOPMENT COMMISSION	executed this contract as of the date first written  AMETHYST HOUSE, INC.
By: David Walter, President	By: Mark DeLong, Executive Director
By: Michael Gentile, Secretary	

#### BLOOMINGTON HOUSING AUTHORITY

AND

### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborhood	Development Dep	partment ("Grantee") and
Bloomington Housing Authority, ("Subrecipie	ent").	

WHEREAS, on July 30, 2014 the Bloomington Housing Authority and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to complete interior renovations at 1220-126 W. 12th.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Grantee:	Subrecipient:
Robert Woolford, Program	Manager Rhonda Moore, Modernization Coordinator
Housing and Neighborhood	1007 N. Summit St.
Development	Bloomington, Indiana 47404
City of Bloomington	Tel: (812) 339-3491
P.O. Box 100	
Bloomington, Indiana 4740	2
Tel: (812) 349-3401	
Fax: (812) 349-3582	

IN WITNESS WHEREOF, the Parties have executed this contract as of the date first written above.

above.  REDEVELOPMENT COMMISSION	BLOOMINGTON HOUSING AUTHORITY	
By: David Walter, President	By: Jennifer Osterholt, Executive Director	
By: Michael Gentile, Secretary		

# MODIFICATION OF COMMUNITY DEVELOPMENT BLOCK GRANT AGREEMENT BETWEEN LIFEDESIGNS, INC.

#### JESIGNS, II AND

### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborho	ood Developme	ent Department ("Grantee") and
Monroe County United Ministries, Inc. ("S	Subrecipient").	

WHEREAS, on July 29, 2014 the LifeDesigns, Inc. and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to remove and replace windows with energy efficient windows located at 1818, 1820, 1842, 1844, 1846 and 1848 S. Covey Lane.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Grantee:	Subrecipient:
Robert Woolford, Program Manager	Susan Rinne, Executive Director or
Housing and Neighborhood	Cindy Fleetwood, Housing Manager for
Development	LifeDesigns, Inc.
City of Bloomington	200 E. Winslow Road
P.O. Box 100	Bloomington, Indiana 47401
Bloomington, Indiana 47402	Tel: (812) 332-9615
Tel: (812) 349-3401	
Fax: (812) 349-3582	

IN WITNESS WHEREOF, the Parties have above.  REDEVELOPMENT COMMISSION	ve executed this contract as of the date first written  LIFEDESIGNS, INC.	
By: David Walter, President	By: Susan Rinne, Executive Director	
By: Michael Gentile, Secretary		

#### MONROE COUNTY UNITED MINISTRIES, INC.

AND

#### HOUSING AND NEIGHBORHOOD DEVELOPMENT DEPARTMENT CITY OF BLOOMINGTON

THIS AGREEMENT, entered into this	day of	, 2014 by and between the City
of Bloomington's Housing and Neighborh	nood Developn	nent Department ("Grantee") and
Monroe County United Ministries, Inc. ("	Subrecipient")	•

WHEREAS, on July 28, 2014 the Monroe County United Ministries, Inc. and the City of Bloomington's Housing and Neighborhood Development Department entered into a Funding Agreement where the Grantee will disperse funds to the Subrecipient to replace the roof at the childcare facility located at 827 W. 14th Ct.

- 1. The Subgrantee must provide any information needed pursuant to these requirements. This includes entity information, the unique identifier of the Grantee, the unique identifier of the Grantee's parent if applicable, and relevant executive compensation data, if applicable. See subsection 3 below regarding executive compensation data).
  - a) Data Universal Numbering System (DUNS): Pursuant to FFATA reporting requirements and in order to receive funding under this Agreement, the Subrecipient shall provide City with a valid Dun & Bradstreet (D&B) Data Universal Numbering System (DUNS) number that identifies the Grantee. A DUNS number may be requested online at <a href="http://fedgov.dnb.com/webform">http://fedgov.dnb.com/webform</a>.
  - b) System for Award Management (SAM): The Subrecipient shall register in the System for Award Management (SAM), which is the primary registrant database for the US Federal Government, and shall enter any information required by FFATA into the SAM, update the information at least annually after the initial registration, and maintain its status in the SAM through the Term of this Agreement. Information regarding the process to register or update information in the SAM can be obtained at <a href="https://www.sam.gov">www.sam.gov</a>.
  - c) Executive Compensation: The Subrecipient shall report the names and total compensation of the five (5) most highly compensated officers of the Grantee in SAM if the Grantee in the preceding fiscal year received eighty percent (80%) or more of its annual gross revenues from Federal contracts and Federal financial

- 2. HAND will add the FFATA reporting requirements to its Comprehensive Annual Performance Evaluation Report (CAPER) checklist in order to meet the November 30th deadline. HAND's Comprehensive Annual Performance Evaluation Report is due to HUD no later than August 30th of each year. Please see checklist as Attachment C. The reports for the CAPER are completed by the program managers and reviewed by the director or assistant director prior to submission to HUD. The FFATA report will be initialed by the director or assistant director upon review.
- 3. Except as set forth in this Modification, the Agreement is unaffected and shall continue in full force and effect in accordance with its terms. If there is conflict between this Modification and the Agreement or any earlier amendment, the terms of this Modification will prevail.

Grantee:	Subrecipient:
Robert Woolford, Program Manager	Meri Reinhold, Executive Director
Housing and Neighborhood	Monroe County United Ministries, Inc
Development	827 W. 14th Court
City of Bloomington	Bloomington, Indiana 47404
P.O. Box 100	Tel: (812) 339-3429
Bloomington, Indiana 47402	Fax: (812) 339-2912
Tel: (812) 349-3401	
Fax: (812) 349-3582	

IN V		we executed this contract as of the date first	written
	EVELOPMENT COMMISSION	MONROE COUNTY UNITED MINISTRIE INC.	S,
By:	David Walter, President	By: Meri Reinhold, Executive Director	or
By:	Michael Gentile, Secretary	_	

Home Modification for Accessible Living (HMAL) Applicant Mobile Home Arlington Valley

Married couple both in their 60s. Have lived in home over 10 years and intend to stay put. One applicant has physical health issues and is in need of a ramp to safely and to comfortably access the home.

AMI: 60%

The project is to install a treated wood ramp for accessibility into the home. The project total cost of \$6,100 is \$2,600 over the maximum amount set in the HMAL program guidelines for mobile homes (\$3,500). The cost is higher due to the necessary ramp length to meet ADA slope requirements.